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| | 90 09/13/2005 OLOFF TAYLOR & BOULEVARD { {A 90025-1030 | ZAFMAN | DEC 15 2005 | -\ c | ertificate of Mailing or Tran this Fee(s) Transmittal is beir e with sufficient postage for fi ail Stop ISSUE FEE address SPTO (571) 273-2885, on the | smission |
| 205111(02225, 0 | , | N/A | DEMARK OF THE | / | M In Chun | |
| | | * | SMARK | | Ms - | (Signature) |
| | | | | | 0 12/12/05 | (Date) |
| APPLICATION NO. | FILING DATE | | FIRST NAMED INVENTOR | | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 09/023,170 | 02/13/1998 | THOMAS J. HOL | | LMAN | 042390.P5346 | 6582 |
| TITLE OF INVENTION: M SYSTEM MEMORY CONT | | | | | IODULE CONTROLLER INT | TERFACING BETWEEN A |
| APPLN, TYPE | SMALL ENTITY | ISSUE F | EE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
| nonprovisional | NO | \$1400 |) | · \$0 | \$1400 | 12/13/2005 |
| EXAMINER | | ART UNIT | | CLASS-SUBCLASS | ٦ | |
| VERBRUGGE, KEVIN | | 2189 | 2189 71 | | | |
| "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND | ence address (or Change of 22) attached. ion (or "Fee Address" Indicate more recent) attached. Use | Correspondence ation form e of a Customer E PRINTED ON T | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. NTHE PATENT (print or type) | | | |
| (A) NAME OF ASSIGNEE | | | nee data will appear on the patent. If an assignee is identified below, the document has been filed for NOT a substitute for filing an assignment. 12/16/2005 BABRAHA2 00000004 09023170 (B) RESIDENCE: (CITY and STATE OR COUNTRY) 01 FC:1501 1400.00 OP | | | |
| Intel Corporation | | S | Santa Clara, California | | | |
| Please check the appropriate | assignee category or catego | ries (will not be pr | inted on the patent |): 🗖 Individual 🕱 | Corporation or other private g | roup entity Government |
| 4a. The following fee(s) are | | | 4b. Payment of Fee(s): | | | |
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| Publication Fee (No small entity discount permitted) | | | Payment by credit card. Form PTO-2038 is attached. | | | |
| Advance Order - # of Copies | | | The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2666 (enclose an extra copy of this form). | | | |
| 5. Change in Entity Status a. Applicant claims SI | • | ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). | | | | |
| The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco | is requested to apply the Issu ublication Fee (if required) vords of the United States Pate | ue Fee and Publica will not be accepte ent and Trademark | tion Fee (if any) or d from anyone oth Office. | to re-apply any previous than the applicant; a re | usly paid issue fee to the applic egistered attorney or agent; or | cation identified above. the assignee or other party in |
| Authorized Signature | Compat | all | | Date | 12/3/25 | |
| Typed or printed name | Edwin H. Taylor | | | Registrati | on No. 25,129 | |
| an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313- | ity is governed by 35 U.S.C. plication form to the USPT for reducing this burden, slinia 22313-1450. DO NOT 1450. | 122 and 37 CFR O. Time will vary nould be sent to th SEND FEES OR (| 1.14. This collection depending upon the Chief Information COMPLETED FO | on is estimated to take I he individual case. Any n Officer, U.S. Patent ar RMS TO THIS ADDRE | y the public which is to file (ar 2 minutes to complete, includ comments on the amount of to d Trademark Office, U.S. De SS. SEND TO: Commissioner it displays a valid OMB control | ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, |